SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		FOR LINE NUMBER: PAGE 520 / 561		
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only	22 X 23	24 25 2 28c 29 3	
Any Information copied from such Reports and Stater or for commercial purposes, other than using the name					
NAME OF COMMITTEE (In Full)  UAW - V - CAP (UAW VOLUNTARY COM			ion commonions nom s	deri committee	
Full Name (Last, First, Middle Initial) FRIENDS OF JOHN BARROW			Transaction ID: SI Date of Disbursemen		
Mailing Address 2141 WEST BROAD ST SUITE B	REET		07	<sup>'</sup> 20077	
City ATHENS	State Zip Code GA 30606		Amount of Each Disk	oursement this Period	
Purpose of Disbursement CONTRIBUTION Candidate Name		Category/		1000.00	
	ement For: 2008 Primary General	Type			
President State: GA District: 12	Other (specify) ▼				
Full Name (Last, First, Middle Initial) FRIENDS OF LOIS CAPPS			Transaction ID: SI Date of Disbursemen	t	
Mailing Address PO BOX 23940			0 9 1 4	<sup>y</sup> 2007	
City SANTA BARBARA	State Zip Code CA 93121		Amount of Each Disk	oursement this Period	
Purpose of Disbursement CONTRIBUTION				1000.00	
Candidate Name LOIS G CAPPS		Category/ Type			
· -	ement For: 2008 Primary General Other (specify)				
Full Name (Last, First, Middle Initial) FRIENDS OF LOIS CAPPS			Transaction ID: SI Date of Disbursemen	t	
Mailing Address PO BOX 23940			10 24	<sup>Y</sup> <sup>Y</sup> <sup>Y</sup> <sup>Y</sup> <sup>Y</sup> <sup>Y</sup>	
City SANTA BARBARA	State Zip Code CA 93121		Amount of Each Disk	oursement this Period	
Purpose of Disbursement CONTRIBUTION Candidate Name				1000.00	
LOIS G CAPPS		Category/ Type			
	ement For: 2008 Primary General Other (specify)				
SUBTOTAL of Disbursements This Page (optional)		<b>&gt;</b>		3000.00	
222 3772 c. 2.000.00min rino rago (optional)					